

Return to: Iowa Dept of Natural Resources
Time of Transfer Inspector Certification
502 E. 9th St.

Des Moines, IA 50319-0034

Fax: 515-281-8895

Certified Time of Transfer Inspector Application (DNR Form 542-0192)

Name		phone	_
Business Name		e-mail	_
Address	City	State Zip	_
A .	Time of Transfer Inspections 1) two years experience ope	s" class to become certified. To qualify for crating, installing, inspecting, designing or Basics of Onsite Systems" class.	
1) If you have two (2) years of experience below.	perience provide the contac	et information and a description of your	
Business Name		phone	_
Address	City	State Zip	
Contact		Years experience	
Describe experience			_
Business Name		phone	_
Address	City	State Zip	_
Contact		Years experience	
Describe experienceAttach additional sheets if necessary	y		_
2) If you do not meet the experien at, the "Basic of Onsite Systems"		t be registered for, or show proof of atte ne of Transfer Inspector" course.	ndance
•		of my knowledge. I agree to abide by all to ned in IAC 567 – Chapter 69, "Private Sew	
Print Name			
Signature		Date	

1/09 542-0192